

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>WMS</i>		2-7-02
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>WMS</i>	10303	4-4

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 - Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	2/8/02
2	✓	✓	2/8/02
3	✓	✓	2/8/02
4	✓	✓	2/8/02
5	✓	✓	2/8/02
6	✓	✓	2/8/02
7	✓	✓	2/8/02
8	✓	✓	2/8/02
9	✓	✓	2/8/02
10	✓	✓	2/8/02
11	✓	✓	2/8/02
12	✓	✓	2/8/02
13	✓	✓	2/8/02
14	✓	✓	2/8/02
15	✓	✓	2/8/02
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30	✓	✓	2/8/02
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46	✓	✓	2/8/02
47	✓	✓	2/8/02
48	✓	✓	2/8/02
49	✓	✓	2/8/02
50	✓	✓	2/8/02

Claim	Final	Original	Date
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If more than 150 claims or 10 actions
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Best Available Copy